Approved for use through 1/31/2007. OMB 0651-0032
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/767,126			ling Date 22/2001	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
Т	FOR	N	UMBER FII	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (f), r	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A]	N/A			N/A		
TO'	FAL CLAIMS CFR 1.16(i))		minus 20 =				x \$ =		OR	x \$ =		
IND	EPENDENT CLAIM CFR 1.16(h))	s	minus 3 = *			1	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 :	ngs exceed 100 ion size fee due i) for each on thereof. See 7 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									J			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	08/17/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 31	Minus	37	= 0	1	X \$26 =	0	OR	x s =		
	Independent (37 CFR 1,16(h))	· 5	Minus	···5	= 0	1	X \$110 =	0	OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
^	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1 16(1))		Minus	**	=	1	x s =		OR	x s =		
M	Independent (37 CFR 1.16(h))	•	Minus	***	=]	x \$ =		OR	x \$ =		
Ш	Application Size Fee (37 CFR 1.16(s))]]			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
# If the only in column 1 is less than the only in column 2 write "C" in column 2							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If	If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: "If the "Highest Mumber Previously Paid For IN THIS SPACE is less than 3, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Mumber Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "3". First Description of the Previously Paid For IN THIS SPACE is less than 3, enter "4". First Description of th											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is in this (and by the USPTO to process) an application. Confidentiality is governed by 83 USS. C.12 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suppections for reducing this burdon, should be sent to the Child information Officer. U.S. Patent and Transfer Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.